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mother or a nurse may have to handle in the absence of the doctor or while waiting his coming—convulsions, accidents, foreign bodies in eye, ear, or nose, etc.; also the list of eruptive diseases common in childhood, with the significant symptoms, time of duration, etc. There is a “pretty wit,” a gift for seeing the funny or ridiculous in the tragedies that sometimes grow out of little things in life, that adds greatly to the pleasure of reading the book, and you cannot read it without profit.

**PLAIN HINTS FOR BUSY MOTHERS.** By Miss Marianna Wheeler, superintendent of the Babies' Hospital, New York; graduate of the New York Hospital and Sloane Maternity Hospital, and author of “The Baby.” E. B. Treat & Co., New York, publishers.

Miss Wheeler gives us a very practical little hand-book—or, rather, hand-booklet, for it is less than fifty pages—full of excellent advice, which any one is free to profit by, although the book was written especially for mothers of limited means and more limited time, who must be cook, housekeeper, and general manager of the small income as well as special nurse to baby. It commends itself to friendly or district visitors and to district nurses. Common-sense is the key-note, and when we begin to think how often this ingredient is left out of books supposedly helpful to people who *must* make the most of every minute and of every cent, and who want to keep a cheerful home and healthy children, we appreciate the value of Miss Wheeler's advice.

Her “foreword” says: “Cleanliness is next to godliness, and if the mother only realized what a large part cleanliness played in the health of her child, she would think the small amount of labor it requires well worth the while.” Then follow brief but plain directions for the bathing, feeding, clothing, and care of the baby. Everything is done at the very smallest expense possible, and the limitations to the baby's wardrobe are almost comical. The shirt, ready-made at twenty cents in the store, is to be made at home much more economically, etc. “In homes where the salary or wages of the head of the house is extremely small, and the family demands many, conveniences, not to say necessities, have often to be done without, but with the baby much can be done with very little expense.”

**GYNÆCOLOGICAL NURSING.** By Netta Stewart, sister of the extra-mural gynæcological wards of the Royal Infirmary, Edinburgh. Oliver & Boyd, publishers, Edinburgh.

From the mother country comes a book on gynæcological nursing, the result of ten years' experience as head nurse in the gynæcological wards of the Edinburgh Royal Infirmary, and while it has some features which take from its value, it comes as a much-needed addition to the list of nurses' text-books. Except for a single chapter in various “Handbooks of Nursing,” as, for instance, Chapter XVI. in “Hampton,” we are not supplied with text-books on this special branch of nursing. The drawbacks of the book are due to its local features, names, etc. We dimly conjecture that “batiste” and “jaconet” answer to our oil-silk or rubber tissue; we recognize “wool” to be absorbent cotton, and “lotions” to be solutions as we know them. The cantharides blister, size a half-crown, would induce a mental demoralization similar to that which the problem, “How old is Ann?” cast over our land. These, with occasional pit-

falls due to our ignorance of the British "Pharmacopœia," keep us constantly in mind of the foreign origin of the book. Technically and practically, the teaching is the same as we are accustomed to. A review of Cooke's "Nurses' Handbook of Obstetrics," published in the issue of *Hospital* of December 26, 1903, gave the impression that English nurses did not use the hypodermic syringe; but evidently a misunderstanding exists, for Miss Stewart on various occasions cautions the nurse to have her hypodermic charged, now with ether, or again with strychnia, to be ready for the order when it comes. In one instance she writes as follows: "Under strict orders from the surgeon, rectal feeding, the administration of stimulants by the rectum, the use of hypodermic injections of drugs, like strychnine, etc., to stimulate the heart, of antistreptococci serum to kill off as many of the organisms as possible, and possibly, also, when all hope is gone, the use of morphia, form the substance of the unsuccessful treatment of septic peritonitis."



FROM *Johns Hopkins Hospital Alumnae Magazine*:

"The usefulness of the district nurse seems limitless when we consider that she has even been called on to look for a 'lost dog' in a rough court because it was unsafe for a policeman to enter unattended by another."—*Washington District Nurse*.

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"Those of us who believe in the usefulness of the visiting nurse in the prevention of disease will find further support for such a belief in the help which nurses were able to give recently in tracing the source of infection in eighteen cases of typhoid fever. As no two of these patients were attended by the same physician, it is possible that the cause of the illness might not have been discovered without the inquiries of the nurses, and it seems probable that the prevention of a further spread of the disease was due largely to their efforts. The infection was traced to the uncleanly and unsanitary surroundings of a dairy supplying milk to the establishment in which these young women were employed. As soon as the matter was reported to the Health Department an investigation was made, and in consequence the dairy was closed and the factory put in good sanitary condition."—*Baltimore District Nurse*.

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"It is almost, if not quite, impossible to make a number of children coming from an institution assimilate with others, even in the public schools. They will naturally flock together and the other children will dub them 'Home Children,' and the name will be constantly cast up as a reproach. One of the best ways to obviate this is to scatter the children. Find real homes for them in families, and have them go to school then as the child of the family."—*Child Saving in Baltimore*.